PTO/SB/82 (01-06)
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|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|---------------|-----------------------------|-----------------|------------------|------------------------|----------------------------------|--|--|
| | | Applica | Application Number | | | 10/811,636-Conf. #2385 | | | |
| REVOCATION OF POWER OF ATTORNEY WITH NEW POWER OF ATTORNEY AND | | | Filing Date | | March 29, 2004 | | | | |
| | | | First Named Inventor | | Dennis McDevitt | | | | |
| | | | Art Unit | | 3733 | | | | |
| CHANGE OF CORRESPONDENCE ADDRESS | | | Examiner Name | | J. L. Cumberland | | | | |
| * | | | Attorney Docket Number 0229 | | | 22956-0692 | | | |
| I hereby revoke all previous powers of attorney given in the above-identified application. | | | | | | | | | |
| A Power of Attorney is submitted herewith. OR X I hereby appoint the practitioners associated with the Customer Number: 021125 | | | | | | | | | |
| X Please change the correspondence address for the above-identified application to: | | | | | | | | | |
| OR [| The address associated with Customer Number: | | 021125 | | | | | | |
| Film or NUTTER MCCLENNEN & FISH LLP | | | | | | | | | |
| Individual Name William C. Geary III | | | | | | | | | |
| Address World Trade Center West 155 Seaport Boulevard | | | | | | | | | |
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| lam the: | | | | | | | | | |
| Applicant/Inventor. | | | | | | | | | |
| X Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96) | | | | | | | | | |
| SIGNATURE of Applicant or Assignee of Record | | | | | | | | | |
| Signature Line Signature | | | | | | | | | |
| Name | E. Richard Skula | | | | | | | | |
| Date | Mpril 30 | 200 | | elephone | 73 | 2 | 524-2718 | | |
| NOTE: Signatures of all the inventors or assignees of econd of the entire interest or their representative(s) are required. Submit multiple forms if more than only signature is required, see below. | | | | | | | | | |
| *Total of1 forms are submitted. | | | | | | | | | |
| Certificate of Transmission (37 C.F.R. 1.8(a)) | | | | | | | | | |
| I hereby certify that this correspondence is being electronically filed via EFS-Web with the Commissioner for Patents. P.O. Box 1403. Alexandria. VA 22313-1430 on the date set forth below. May 24 2007 By Milliam C. Geary IIIV | | | | | | | | | |
| May 24, 2007 Date of Signature and Mail Deposit William C. Geary, Reg. No. 31.359 Attorney for Applicant(s) | | | | | | | | | |